## LETTER TO THE SHERIFF (SERVING A NOTICE AND FORMS)

## **Instructions to User**

- 1. Complete this letter. If there is more than one parent or non-parent with physical custody and they do not all live in the same county, you will need to complete this letter for each sheriff that you will be asking to serve a *Request for Name Change (Minor Children)* and all other necessary documents.
- 2. With this letter, include the *Notice* and a copy of your forms for each of the other parties in your case that live in that county, payment or *Order for Waiver of Court Fees*, and a self-addressed and stamped envelope for the sheriff to mail the Affidavit of Service to you.
- 3. Send your letter and the documents listed above to the sheriff's office in the county and state where the other party lives.

Date:					
Sheriff of		_ County St	ate of		<u> </u>
Address of Sherif					
Dear Sheriff:					
Re: Request for	r Name Change (Minor (	Children)			
I am enclosing the	e Request for Name Cha	ange (Minor Chila	ren) and all other r	necessary docu	uments:
to be served on:	Name of Other Party				<u> </u>
	Name of Other Party				
	Street, Apt #	City	State	Zip	<del></del>
to be served on:					(fill in only if there is more
	Name of Other Party				than 1 other party)
	Street, Apt #	City	State	Zip	
to be served on:					(fill in only if there are more
to be served off.	Name of Other Party				than 2 other parties)
	Street Apt#	City	State	Zin	<u> </u>

Check the box that applies:  I have enclosed an Order for Waiver of Court Fees ent	ered by the Court in	County, Illinois, which
waives the cost of service; OR		County, minolo, which
☐ I have enclosed the cost of service \$	·	
Once you have served the enclosed documents, please coenclosed self-addressed stamped envelope.	omplete the Affidavit of Servi	ice and return it to me in the
Thank you for your attention to this matter.		
Sincerely,		
Signature	Printed Name	
orginal and	, into raino	
Street Address, Apt #	City	State Zip
Phone		